

**EXECUTIVE LOBBYING
REGISTRATION/ RENEWAL FOR
THE YEAR OF 2008**

(Fill in year.)

700
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY

Postmark Date: 2/5/08

Aug-08
ck# 1090
#110

ack✓

3071308

Instructions

1. Print in ink or type.
1. Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
1. Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Fowler J. Marston MI
Last First MI

2. BUSINESS PHONE (225) 753-3733
Area Code and Phone Number

3. FAX NUMBER (225) 753-3705

4. BUSINESS ADDRESS 9330 Pecue Lane, Suite A Baton Rouge LA 70809
Street and No. City State Zip

MAILING ADDRESS same as above
Street and No. City State Zip

5. EMPLOYER Louisiana Children's Education Advocates

6. EMPLOYER'S ADDRESS 9330 Pecue Lane, Suite A Baton Rouge LA 70809
Street and No. City State Zip

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Louisiana Children's Education Advocates

Address 9330 Pecue Lane, Suite A Baton Rouge LA 70809

Business or purpose School Choice Advocacy

Does this person pay you? Yes

If No, who pays you? _____

HAND DELIVERED

EXECUTIVE LOBBYING REGISTRATION FORM

Executive Lobbyist Registration No. _____

2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

3. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

4. Name _____

Address _____

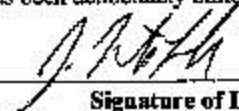
Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.



Signature of Lobbyist

